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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Daniel First name Lee Middle name	First name Middle name	
	Bring your picture identification to your meeting with the trustee.	Mang Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you ha used in the last 8 years	ve		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1155		

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Case number (if known)

Debtor 1 Daniel Lee Mang

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
ny business names and mployer Identification umbers (EIN) you have sed in the last 8 years clude trade names and bing business as names	■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)
	EINS	EINs
here you live	625 Minerva Avenue Wauconda II 60084	If Debtor 2 lives at a different address:
	Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
	Lake County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
Thy you are choosing his district to file for ankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)
	inployer Identification ambers (EIN) you have sed in the last 8 years clude trade names and sing business as names there you live the you are choosing is district to file for	I have not used any business name or EINs. I have not used any business name or EINs. Business name(s) Business name(s) EINs Business name(s) EINs Business name(s) EINs Business name(s) EINs County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Check one: Check one: I have another reason.

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Case number (if known) Debtor 1 Daniel Lee Mang

ar	Tell the Court About	Your B	ankruptcy Ca	ise				
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required</i> page 1 and check the appropriate the second of the seco	d by 11 U.S.C. § 342(b) for Individuals Fili priate box.	ng for Bankruptcy	
	choosing to file under	■ Chapter 7						
		□с	hapter 11					
		□с	hapter 12					
		□с	hapter 13					
3.	How you will pay the fee		about how yo	ou may pay. Typ attorney is subr	ically, if you are paying the fe	check with the clerk's office in your local of the yourself, you may pay with cash, cashing behalf, your attorney may pay with a crec	er's check, or money	
					tallments. If you choose this s (Official Form 103A).	option, sign and attach the Application for	r Individuals to Pay	
						ption only if you are filing for Chapter 7. E if your income is less than 150% of the or		
			applies to you	ur family size an	nd you are unable to pay the f	ee in installments). If you choose this opt Official Form 103B) and file it with your p	ion, you must fill out	
9.	Have you filed for bankruptcy within the	■ No	Э.					
	last 8 years?	☐ Ye						
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy	■ No)					
	cases pending or being filed by a spouse who is	□ Ye	es.					
	not filing this case with you, or by a business partner, or by an affiliate?							
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your	□ No	o. Go to l	ine 12.				
	residence?	■ Ye	. Has yo	our landlord obta	ained an eviction judgment ag	ainst you and do you want to stay in your	residence?	
		_ 16	ss.	No. Go to line	12.	,		
			_			tion Judgment Against You (Form 101A) a	and file it with this	
			_	bankruptcy pet		,		

Document Page 4 of 58 Case number (if known) Debtor 1 Daniel Lee Mang Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is

property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Daniel Lee Mang

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Daniel Lee Mang		Boodii	Case nu	mber (if known)
Part	6: Answer These Ques	tions for Rep	orting Purposes		
16.	What kind of debts do you have?			consumer debts? Consumer debts are ersonal, family, or household purpose."	defined in 11 U.S.C. § 101(8) as "incurred by an
			No. Go to line 16b.		
			Yes. Go to line 17.		
				business debts? Business debts are devestment or through the operation of the	
			No. Go to line 16c.		
			Yes. Go to line 17.		
		16c. S	tate the type of debts you	u owe that are not consumer debts or bus	iness debts
17.	Are you filing under Chapter 7?	□ No. I	am not filing under Chapt	ter 7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured	— Tes. a		7. Do you estimate that after any exempt p available to distribute to unsecured credit	property is excluded and administrative expenses ors?
	creditors?				
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-199 □ 200-999		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000
19.	How much do you estimate your assets to be worth?			□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
20.	How much do you estimate your liabilities to be?			□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
Part	7: Sign Below				
For	you	I have exam	nined this petition, and I d	leclare under penalty of perjury that the ir	oformation provided is true and correct.
				r 7, I am aware that I may proceed, if elig e relief available under each chapter, and	ble, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.
				d not pay or agree to pay someone who is the notice required by 11 U.S.C. § 342(b)	
		I request rel	ief in accordance with the	e chapter of title 11, United States Code,	specified in this petition.
			case can result in fines u		ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Daniel Lee Signature o	e Mang	Signature of De	ebtor 2
		Executed or	April 11, 2017 MM / DD / YYYY	Executed on	MM / DD / YYYY

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Debtor 1 Daniel Lee Mang

Debtor 1 Daniel Lee Mang

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Michael T. Barrett, Sr.	Date	April 11, 2017
Signature of Attorney for Debtor		MM / DD / YYYY
Michael T. Barrett, Sr.		
Printed name		
James D. Huls & Associates		
Firm name		
530 Rockland Road		
Crystal Lake, IL 60014		
Number, Street, City, State & ZIP Code		
Contact phone 815-455-4755	Email address	michael@jdhuls.com
6200869		
Bar number & State		

Page 8 of 58 Document Fill in this information to identify your case: Debtor 1 **Daniel Lee Mang** First Name Middle Name Last Name Debtor 2 First Name Middle Name Last Name (Spouse if, filing) NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known)

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	2,345.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	2,345.00
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	158,003.13
	Your total liabilities	\$	158,003.13
Par	t3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,732.34
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,970.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a nerconal	I family or

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,616.39

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cl	aim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	2,133.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	2,133.00

		Documer	nt Page 10 of 58	
Fill in this infor	mation to identify yo	our case and this filing:		
Debtor 1	Daniel Lee Mai	ng		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the	e: NORTHERN DISTRICT OF	FILLINOIS	
Case number _				☐ Check if this is an
				amended filing
Official Fo	rm 106A/B			
_	e A/B: Pro	nerty		12/15
		<u> </u>	ce. If an asset fits in more than one category, list t	
hink it fits best. B	Be as complete and acc re space is needed, atta	urate as possible. If two married	people are filing together, both are equally respon On the top of any additional pages, write your nan	sible for supplying correct
Part 1: Describe	Each Residence, Build	ling, Land, or Other Real Estate Y	ou Own or Have an Interest In	
. Do you own or I	have any legal or equit	able interest in any residence, bu	ilding, land, or similar property?	
No. Go to Par	rt 2.			
☐ Yes. Where i	is the property?			
Part 2: Describe	Your Vehicles			
2000.1100				
			cles, whether they are registered or not? Incle G: Executory Contracts and Unexpired Leases	
3. Cars, vans, tr	ucks, tractors, spor	tutility vehicles, motorcycles		
■ No				
☐ Yes				
□ res				
	•	•	I vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories	
■ No				
☐ Yes				
			ries from Part 2, including any entries for	\$0.00
.pages you na	ave attached for Par	t 2. Write that number nere	<=<	,
Part 3: Describe	Your Personal and Ho	ousehold Items		
		uitable interest in any of the	following items?	Current value of the
				portion you own? Do not deduct secured claims or exemptions.
_	oods and furnishing			•
Examples: Na ☐ No	ajoi appliances, iurniti	ure, linens, china, kitchenware		
Yes. Desc	ribe			
300				
	Living	room, bedroom, dining ro	om furniture	\$500.00
7. Electronics				

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

Case 17-11429 Doc 1 Filed 04/11/17 Entered 04/11/17 13:50:15 Desc Main Document Page 11 of 58 Debtor 1 , Case number *(if known)* **Daniel Lee Mang** \$500.00 Flat screen tvs and computer 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles □ No ■ Yes. Describe..... \$300.00 Sports cards 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... \$100.00 All necessary used wearing apparel 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,400.00 for Part 3. Write that number here

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No

■ Yes.....

Cash \$20.00

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Case number (if known) Document Debtor 1 Daniel Lee Mang 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No ■ Yes..... 17.1. Checking **BMO Harris** \$5.00 Chase \$20.00 17.2. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others □ No Institution name or individual: Yes. Residential Lease \$900.00 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit $\hfill \square$ Yes. Give specific information about them...

☐ Yes. Give specific information about them...

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

No

		Case	17-11429	Doc 1		Entered 04/11/17 13:50:15 Page 13 of 58	Desc Main
D	ebtor 1	Daniel	Lee Mang		Document	Case number (if known)	
27	Examp ■ No	oles: Buildi	ises, and other ng permits, exclusific information a	ısive licenses	ngibles , cooperative association	n holdings, liquor licenses, professional licens	es
M	oney or	property o	owed to you?				Current value of the portion you own? Do not deduct secured
							claims or exemptions.
28	_	funds owe	ed to you				
	■ No □ Yes.	Give speci	ific information a	bout them, inc	cluding whether you alre	ady filed the returns and the tax years	
29	Examp		due or lump sum		usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
30		<i>bles:</i> Unpai	someone owes y id wages, disabil fits; unpaid loans	ity insurance		efits, sick pay, vacation pay, workers' compe	nsation, Social Security
	☐ Yes.	Give spec	cific information				
31	Examp ■ No	oles: Health				HSA); credit, homeowner's, or renter's insurar	nce
	⊔ Yes.	name the		any of each p ipany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
32	If you a some o	are the ber one has die	neficiary of a livin		someone who has die ct proceeds from a life in	ed surance policy, or are currently entitled to reco	eive property because
33	Examp ■ No	ples: Accid		nt disputes, in	you have filed a lawsui surance claims, or rights	it or made a demand for payment to sue	
34	■ No	_	t and unliquidat		every nature, including	g counterclaims of the debtor and rights to	set off claims
35	■ No		sets you did no	t already list			
36					om Part 4, including a	ny entries for pages you have attached	\$945.00
Pa	art 5: De	scribe Any	Business-Related	I Property You	Own or Have an Interest	In. List any real estate in Part 1.	
37.	Do you	own or have	e any legal or equ	itable interest	in any business-related p	roperty?	
		to Part 6.					
	☐ Yes. G	Go to line 38					

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Case number (if known) Document Debtor 1 **Daniel Lee Mang** Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$0.00 57. Part 3: Total personal and household items, line 15 \$1,400.00 Part 4: Total financial assets, line 36 \$945.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 \$0.00 61. Total personal property. Add lines 56 through 61... \$2,345.00 Copy personal property total \$2,345.00

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$2,345.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Daniel Lee Mang			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is an
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exem	ptions are	you claiming?	Check one only	, even if	your spouse is	filing with	vou.
----	-------------------	------------	---------------	----------------	-----------	----------------	-------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Check only one box for each exemption.		Specific laws that allow exemption
	Copy the value from Schedule A/B			
Living room, bedroom, dining room furniture	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Flat screen tvs and computer Line from Schedule A/B: 7.1	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
Ellie Holli Gonedale A.B. 7.1			100% of fair market value, up to any applicable statutory limit	
Sports cards Line from Schedule A/B: 8.1	\$300.00		\$300.00	735 ILCS 5/12-1001(b)
Ellie Holli Gonedale A.B. G.1			100% of fair market value, up to any applicable statutory limit	
All necessary used wearing apparel Line from Schedule A/B: 11.1	\$100.00		\$100.00	735 ILCS 5/12-1001(a)
Line IIom Schedule Av.B. 11.1			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$20.00		\$20.00	735 ILCS 5/12-1001(b)
Line noni Scriedule AVD. 10.1			100% of fair market value, up to any applicable statutory limit	

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Current value of the portion you own			Specific laws that allow exemption	
\$5.00		\$5.00	735 ILCS 5/12-1001(b)	
		100% of fair market value, up to any applicable statutory limit		
\$20.00		\$20.00	735 ILCS 5/12-1001(b)	
		100% of fair market value, up to any applicable statutory limit		
			725 II CS 5/42 4004/b)	
\$900.00		\$900.00	735 ILCS 5/12-1001(b)	
\$900.00		\$900.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)	
	portion you own Copy the value from Schedule A/B \$5.00	portion you own Copy the value from Schedule A/B \$5.00	portion you own Copy the value from Schedule A/B \$5.00 \$5.00 \$5.00 \$5.00 \$20.00 \$20.00 \$20.00 \$20.00	

		1211111	<u> </u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Daniel Lee Mang			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

	743C 17 11+23	Document	Page 18	8 of 58	Desc Main
Fill in this info	ormation to identify your				
Debtor 1	Daniel Lee Mang				
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle Name	Loot Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Fo	rm 106E/F				
		ho Have Unsecured	Claims		12/15
		e Part 1 for creditors with PRIORIT		Part 2 for creditors with NONPRIOR	
Schedule D: Cree eft. Attach the C	ditors Who Have Claims Sec	ired Leases (Official Form 106G). D ured by Property. If more space is r e. If you have no information to rep	needed, copy 1	the Part you need, fill it out, numbe	r the entries in the boxes on the
Part 1: List	All of Your PRIORITY Un	secured Claims			
_ `	litors have priority unsecure	d claims against you?			
No. Go to	o Part 2.				
☐ Yes.					
	All of Your NONPRIORIT				
3. Do any cred	ditors have nonpriority unsec	cured claims against you?			
☐ No. You	have nothing to report in this pa	art. Submit this form to the court with	your other sche	dules.	
Yes.					
unsecured c	laim, list the creditor separately	aims in the alphabetical order of the for each claim. For each claim listed st the other creditors in Part 3.If you h	, identify what t	ype of claim it is. Do not list claims alr	ready included in Part 1. If more
					Total claim
4.1 Advo	cate Health & Hospital	Corp Last 4 digits of acco	ount number	Various	\$35,966.00
•	ority Creditor's Name	When was the debt	in a compa d O	2046 2047	
	Windsor Drive Brook, IL 60523	when was the debt	incurred?	2016-2017	
	r Street City State Zlp Code	As of the date you f	ile, the claim i	s: Check all that apply	
	curred the debt? Check one.				
Deb	tor 1 only	☐ Contingent			
☐ Deb	tor 2 only	☐ Unliquidated			
☐ Deb	tor 1 and Debtor 2 only	☐ Disputed			
☐ At le	east one of the debtors and and		ITY unsecured	I claim:	
	ck if this claim is for a comr	<u> </u>			
debt	laim subject to offset?	Obligations arisin report as priority clair		ration agreement or divorce that you	did not
■ No	nam subject to onset:	' '		g plans, and other similar debts	
■ No				a F diriniai dobio	
⊔ res		Other. Specify	vicuicai		

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Debtor 1 Daniel Lee Mang Case number (if know) 4.2 \$14,618.06 **Avant Credit, Inc** Last 4 digits of account number 2068 Nonpriority Creditor's Name C/O CACH LLC When was the debt incurred? Sold on 2/27/2017 P.O. Box 5980 Denver, CO 80217-5980 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Personal loan Other, Specify 4.3 **Bank Of America** Last 4 digits of account number 8649 \$6,036.00 Nonpriority Creditor's Name Nc4-105-03-14 Opened 04/07 Last Active Po Box 26012 When was the debt incurred? 9/05/16 Greensboro, NC 27410 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.4 **BMO Harris Bank** \$411.60 Last 4 digits of account number 4372 Nonpriority Creditor's Name P.O. Box 6290 When was the debt incurred? 2016 Carol Stream, IL 60197-6290 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit card ☐ Yes

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Debtor 1 Daniel Lee Mang Case number (if know) 4.5 \$2,022.00 Cap1/Best Buy Last 4 digits of account number 9934 Nonpriority Creditor's Name Opened 08/11 Last Active P.O. Box 49352 When was the debt incurred? 8/31/16 San Jose, CA 95161 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Charge Account 4.6 **Capital One** Last 4 digits of account number 6013 \$807.00 Nonpriority Creditor's Name Opened 12/08 Last Active Attn: General Correspondence/Bankruptcy When was the debt incurred? 8/31/16 Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.7 Centegra Health System 0001 \$2,872.83 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 6204 When was the debt incurred? 2016 Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical ☐ Yes

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Jebio	Daniei Lee Mang		Case number (if know)		
4.8	Centegra Health System	Last 4 digits of account number	0001	\$6,792.56	
	Nonpriority Creditor's Name P.O. Box 6204	When was the debt incurred?	2016		
	Carol Stream, IL 60197-6204 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Medical			
4.9	Centegra Health System Nonpriority Creditor's Name	Last 4 digits of account number	0001	\$5,558.39	
	P.O. Box 6204	When was the debt incurred?	2016		
	Carol Stream, IL 60197-6204				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims			
	■ No	Debts to pension or profit-sharing			
	Yes	Other. Specify Medical			
4.1	Citi Diamond Preferred Card	l d dinite of	3853	\$1,848.79	
)	Nonpriority Creditor's Name	Last 4 digits of account number		φ1,040.79	
	P.O. Box 6500	When was the debt incurred?	2015-2016		
	Sioux Falls, SD 57117 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.	As of the date you me, the dam's	3. Officers all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only				
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	l claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	■ Other. Specify Credit card	purchases		

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Case number (if know)

Dobic	Danier Lee Many		Case Harriser (ii know)		
4.1 1	Comenity Bank/Harlem Furniture	Last 4 digits of account number	0515	\$2,866.00	
	Nonpriority Creditor's Name Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 10/20/14 Last Active 9/11/16		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Charge Acc	count		
4.1	Diversified Consultant Nonpriority Creditor's Name	Last 4 digits of account number	8604	\$62.00	
	Dci	When was the debt incurred?	Opened 10/06/16		
	Po Box 551268 Jacksonville, FL 32255 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim			
	Debtor 1 only				
	Debtor 2 only				
	Debtor 1 and Debtor 2 only				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community				
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Collection	Attorney At T Wireless		
4.1	Dr. Asya Ali Nonpriority Creditor's Name	Last 4 digits of account number		\$284.00	
	1775 Dempster St. Park Ridge, IL 60068	When was the debt incurred?	2017		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated☐ Disputed			
	Debtor 1 and Debtor 2 only	d claim:			
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	. J. G.		
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	□ Yes	■ Other. Specify Medical			
	_ 100	- Other. Specify			

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	· ,	
Last 4 digits of account number	9178	\$2,156.00
When was the debt incurred?	2016	
As of the date you file, the claim i	is: Check all that apply	
Contingent		
_ '		
•	d claim:	
☐ Student loans		
☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
Debts to pension or profit-sharin	g plans, and other similar debts	
Other. Specify Medical		
Last 4 digits of account number	6741	\$2,611.00
When was the debt incurred?	2017	
As of the date you file, the claim i	is: Check all that apply	
•	,	
☐ Contingent		
☐ Unliquidated		
☐ Disputed		
Type of NONPRIORITY unsecured	d claim:	
☐ Student loans		
☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
Debts to pension or profit-sharin	g plans, and other similar debts	
Other. Specify Medical		
Last 4 digits of account number	7056	\$964.00
When was the debt incurred?	2017	
As of the date you file, the claim i	is: Check all that apply	
,,,,,		
☐ Contingent		
-		
·		
•	d claim:	
☐ Student loans		
☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
Debts to pension or profit-sharin	g plans, and other similar debts	
Other. Specify Medical		
	When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin Other. Specify Medical Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin Cother. Specify Medical Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin	When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Other. Specify Medical Last 4 digits of account number Unliquidated Disputed Type of NONPRIORITY unsecured claim: Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Other. Specify Medical Last 4 digits of account number Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Last 4 digits of account number Other. Specify Medical Last 5 digits of account number Other Specify Medical Last 6 digits of account number Other Specify Medical Last 7056 Unliquidated Disputed Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims is: Check all that apply

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Daniei Lee Mang	Case number (if know)	
Dr. James Feldman	Last 4 digits of account number	\$1,740.00
Nonpriority Creditor's Name 450 W. Highway 22	When was the debt incurred? 2017	
Barrington, IL 60010 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_		
Debtor 1 only	☐ Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
Dr. Michael Lesser	Last 4 digits of account number 7401	\$104.92
Nonpriority Creditor's Name 1095 Pingree Road Suite 108 Crystal Lake, IL 60014	When was the debt incurred? 2016	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify Medical	
Dr. Oliver Kim	Last 4 digits of account number 147E	\$124.54
Nonpriority Creditor's Name 1775 Dempster	When was the debt incurred? 2017	
Park Ridge, IL 60068 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	no or mo date year may also date or	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other Specify Medical	

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Daniei Lee Mang	Case number (if know)	
Dr. Paras Patel	Last 4 digits of account number	\$1,450.00
Nonpriority Creditor's Name 2400 N. Rockton	When was the debt incurred? 2017	
Rockford, IL 61103 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical	
Dr. Rebeca Andersen	Last 4 digits of account number 1847	\$885.00
Nonpriority Creditor's Name 4201 W. Medical Center McHenry, IL 60050	When was the debt incurred? 2016	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical	
Dr. Thomas Peeters	Last 4 digits of account number 8360	\$150.00
Nonpriority Creditor's Name 5 Wood Creek Road	When was the debt incurred? 2016	
Barrington, IL 60010 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Medical	

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Case number (if know)

Daillei Lee Maily		- Case Humber (ii know)	
Dr. Wendy Ward	Last 4 digits of account number	622E	\$30.49
Nonpriority Creditor's Name 4201 W. Medical Drive McHenry, IL 60050	When was the debt incurred?	2016	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	•		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Medical		
Forest Recovery Servic	Last 4 digits of account number	4992	\$438.00
Nonpriority Creditor's Name			·
Po Box 83	When was the debt incurred?	Opened 02/16	
Barrington, IL 60011 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the dam's	S. Offeck all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
☐ Yes		Attornev Sovereign Rehab -	
H & R Accounts, Inc	Last 4 digits of account number	5765	\$887.00
Nonpriority Creditor's Name			4001.00
Po Box 672	When was the debt incurred?	Opened 07/16	
Moline, IL 61265 Number Street City State Zlp Code	- As of the date you file the claim	is: Check all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim	ъ. Опеск ан тат арргу	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing		
□Yes	Collection A Other. Specify Mchenry	Attorney Centegra Hospital-	

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Debtor 1 Daniel Lee Mang 4.2 H & R Accounts, Inc 5546 \$534.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Po Box 672 When was the debt incurred? **Opened 07/16 Moline, IL 61265** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Centegra Hospital-☐ Yes Other. Specify Mchenry 4.2 \$280.00 H & R Accounts, Inc 5552 Last 4 digits of account number Nonpriority Creditor's Name Po Box 672 When was the debt incurred? **Opened 07/16** Moline, IL 61265 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Centegra Hospital-**☐ Yes Other. Specify Mchenry 4.2 **Iowa Student Loan** 0006 \$1,869.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Opened 09/06 Last Active 6775 Vista Dr When was the debt incurred? 2/03/17 West Des Moines, IA 50266 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ■ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

Educational

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Debtor 1 Daniel Lee Mang Case number (if know) 4.2 Isl/pnc Bank 0005 \$264.00 Last 4 digits of account number 9 Nonpriority Creditor's Name Opened 12/05 Last Active 6805 Vista Dr # I When was the debt incurred? 2/03/17 West Des Moines, IA 50266 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.3 **McHenry Orthoapedics** \$1,450.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 420 N. IL Rt. 31 When was the debt incurred? 2017 Crystal Lake, IL 60014 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical 4.3 0001 Med Business Bureau \$217.00 Last 4 digits of account number Nonpriority Creditor's Name 1460 Renaissance Dr #400 When was the debt incurred? **Opened 10/13** Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Tricounty Emrg** ☐ Yes Other. Specify **Physicians**

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Debtor 1 Daniel Lee Mang Case number (if know) 4.3 **Mnet Fin Inc** 7552 \$1,240.00 Last 4 digits of account number 2 Nonpriority Creditor's Name 95 Argonaut When was the debt incurred? Opened 5/20/11 Aliso Viejo, CA 92656 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Trophy Club Medical Center **Nissan Motor Acceptance** 4.3 9377 \$26,195.00 3 Corp/Infinity Lt Last 4 digits of account number Nonpriority Creditor's Name Nmac/Attn: Bankruptcy Opened 10/16 Last Active Po Box 660360 When was the debt incurred? 3/06/17 Dallas, TX 75266 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Lease Other. Specify Nissan Motor Acceptance 4.3 9358 \$17,520.00 Corp/Infinity Lt Last 4 digits of account number Nonpriority Creditor's Name Nmac/Attn: Bankruptcy Opened 10/16 Last Active Po Box 660360 When was the debt incurred? 3/23/17 Dallas, TX 75266 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Lease

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Debtor 1 Daniel Lee Mang Case number (if know) 4.3 Nordstrom Fsb 6199 \$557.00 Last 4 digits of account number 5 Nonpriority Creditor's Name Correspondence Opened 07/13 Last Active Po Box 6555 When was the debt incurred? 9/21/16 Englewood, CO 80155 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.3 **Northern Illinois Medical Center Various** \$5,531.75 Last 4 digits of account number 6 Nonpriority Creditor's Name P.O. Box 6203 2016 When was the debt incurred? Carol Stream, IL 60197-6203 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical 4.3 Personal Finance/p312 7101 \$2,899.20 Last 4 digits of account number Nonpriority Creditor's Name Opened 07/16 Last Active 1350 East Chicago St. Suite 28 9/01/16 When was the debt incurred? Elgin, IL 60123 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Unsecured Other, Specify

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Debtor 1 Daniel Lee Mang Case number (if know) 4.3 Rose Iverson FNP 8601 \$15.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 1095 Pingree Road Suite 108 When was the debt incurred? 2016 Crystal Lake, IL 60014 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical 4.3 Syncb/hh Gregg 4472 \$3,604.00 Last 4 digits of account number 9 Nonpriority Creditor's Name Opened 10/12 Last Active C/o Po Box 965036 When was the debt incurred? 9/15/16 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.4 Synchrony Bank/Walmart \$2.921.00 0280 Last 4 digits of account number 0 Nonpriority Creditor's Name Attn: Bankruptcy Opened 11/10 Last Active Po Box 956060 When was the debt incurred? 9/16/16 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Charge Account

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Deblor i	Daniei Le	e wang		Case n	uffiber (if know						
4.4	Target		Last 4 digits of account number	8595			\$510.00				
(I	Nonpriority Creditor's Name C/O Financial & Retail Srvs Mailstopn BT POB 9475 Minneapolis, MN 55440		When was the debt incurred?		Opened 10/12 Last Active 5/26/16						
1	Number Street (City State Zlp Code	As of the date you file, the claim	is: Check	all that apply						
	_	the debt? Check one.									
	Debtor 1 onl	ly	☐ Contingent								
l	Debtor 2 onl	ly	☐ Unliquidated								
	Debtor 1 and		☐ Disputed	·							
		of the debtors and another	Type of NONPRIORITY unsecured claim:								
		s claim is for a community		☐ Student loans							
	debt Is the claim su	bject to offset?	☐ Obligations arising out of a separe propert as priority claims	Obligations arising out of a separation agreement or divorce that you did not							
ı	■ No	•	☐ Debts to pension or profit-shari	ng plans, a	and other simila	ar debts					
	☐ Yes		Other. Specify Credit Care	t							
_		ljustment F	Last 4 digits of account number	0619		_	\$710.00				
	Nonpriority Cred 440 Challen	ige Street	When was the debt incurred?	Open	ned 12/19/1	4					
	Freeport, IL 61032 Number Street City State Zlp Code		As of the date you file, the claim	is: Check	all that apply						
1	Who incurred t	the debt? Check one.									
I	Debtor 1 onl	ly	☐ Contingent								
ı	Debtor 2 onl	ly	☐ Unliquidated	☐ Unliquidated							
l	Debtor 1 and	d Debtor 2 only	☐ Disputed								
ı	At least one	of the debtors and another	Type of NONPRIORITY unsecure	d claim:							
		s claim is for a community	☐ Student loans								
debt Is the claim subject to offset?			☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims								
	No		Debts to pension or profit-shari	0.							
	☐ Yes		Other. Specify Collection	Attorne	ey Barringt	on Surgeons					
Part 3:	List Others	s to Be Notified About a De	ebt That You Already Listed								
is trying have m	g to collect fro ore than one c	m you for a debt you owe to s	about your bankruptcy, for a debt that yomeone else, list the original creditor in at you listed in Parts 1 or 2, list the add or submit this page.	Parts 1	or 2, then list	the collection agency	here. Similarly, if you				
	d Address		On which entry in Part 1 or Part 2 did you	list the o	riginal creditor?	?					
		& Brouch, Ltd.				Priority Unsecured Claim					
	. Farnswort , IL 60505	in Ave		Part 2: 0	Creditors with N	Nonpriority Unsecured C	claims				
	, 00000		Last 4 digits of account number	C	432						
Part 4:	Add the Ar	mounts for Each Type of U	Insecured Claim								
. Total th		certain types of unsecured cla	aims. This information is for statistical i	eporting	purposes onl	y. 28 U.S.C. §159. Add	the amounts for each				
					Т	otal Claim					
	6a.	Domestic support obligation	ıs	6a.	\$	0.00					
To clai	otal ims										
from Pa		Taxes and certain other deb	ts you owe the government	6b.	\$	0.00					
	6c.		I injury while you were intoxicated	6c.	\$	0.00					
	6d.	Otner. Add all other priority ur	nsecured claims. Write that amount here.	6d.	\$	0.00					
	6e.	Total Priority. Add lines 6a th	rough 6d.	6e.	\$	0.00					

Official Form 106 E/F

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Debtor 1 Daniel Lee Mang

				Total Claim
	6f.	Student loans	6f.	\$ 2,133.00
Total claims				<u> </u>
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 155,870.13
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 158,003.13

		1700.000	III Paue 34 01 36	
Fill in this infor	mation to identify your	case:		
Debtor 1	Daniel Lee Mang			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

P	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Nissan Motor Acceptance NMAC/BANKRUPTCY P.O. Box 660360 Dallas, TX 75266	Three year lease for 2017 Nissan Maxima
2.2	Nissan Motor Acceptance NMAC/Bankruptcy P.O. Box 660360 Dallas, TX 75266	Three (3) year lease on 2016 Nissan Rogue

		Docume	ent Page 35 d	of <u>58</u>	
Fill in this	information to identify your	case:			
Debtor 1	Daniel Lee Mang	1			
Debior 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, fili	ng) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case num (if known)	ber				Charle if this is an
(II KIIOWII)					☐ Check if this is an amended filing
					amended lilling
Officia	l Form 106H				
		lahtara			40/4
sched	lule H: Your Cod	leptors			12/15
No Yes 2. With Arizon No. Yes 3. In Col	hin the last 8 years, have yo ha, California, Idaho, Louisiana Go to line 3. S. Did your spouse, former spo	u lived in a community pr a, Nevada, New Mexico, Pu ouse, or legal equivalent live tors. Do not include your	roperty state or territor lerto Rico, Texas, Wash e with you at the time? spouse as a codebtor	ry? (Community property state iington, and Wisconsin.) r if your spouse is filing with	es and territories include n you. List the person shown
Form					dule E/F, or Schedule G to fill
	Column 1: Your codebtor			Column 2: The creditor	to whom you owe the debt
	Name, Number, Street, City, State and Z	ZIP Code		Check all schedules that	t apply:
3.1				Cohodulo D. lina	
	Name			Schedule D, line	
				☐ Schedule E/F, line☐ Schedule G, line	
	Number Street	Ctata	ZID Code		
	City	State	ZIP Code		
					
3.2	Name			Schedule D, line	
				☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street	Chata	710.0-4-		
	City	State	ZIP Code		

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Fill	in this information to identif	y your case	:									
Del	otor 1 Danie	el Lee Mai	ng				_					
	otor 2						_					
Uni	ted States Bankruptcy Cou	rt for the:	NORTHERN DISTRIC	T OF IL	LINOIS		_					
(If kr	fficial Form 106	 <u>I</u>						☐ An ☐ A s 13 i		nt showing softhe t	ng postpetition chap following date:	pter
S	chedule I: You	r Incor	ne									12/15
sup spo atta	as complete and accurate plying correct information use. If you are separated to the a separate sheet to thing. Describe Employers	n. If you are and your s s form. On	e married and not filin pouse is not filing wit	g jointly h you, d	y, and your spo do not include	use i infori	s livi natio	ing with yo on about y	ou, inclu our spo	ıde infor use. If m	mation about you nore space is need	r led,
1.	Fill in your employment information.	:		Debto	r 1				Debtor 2	or non-f	filing spouse	
	If you have more than one attach a separate page w information about addition	_{rith} E	Employment status	■ Employed □ Not employed Property Manager					■ Employed □ Not employed CNA			
	employers.	c	Occupation					(
	Include part-time, season self-employed work.	al, or	Employer's name	Lakepointe No. 1 HOA					Good Shepherd Hospital			
	Occupation may include sor homemaker, if it applie	cupation may include student homemaker, if it applies. Employer's address 750 W. Lake Cook Rd. Suing 190 Buffalo Grove, IL 60089					Barrington, IL 60010			60010		
		H	low long employed th	ere?	5 years				_1	year		-
Par	Give Details Ab	out Month	y Income									
	mate monthly income as use unless you are separate		you file this form. If y	ou have	nothing to repo	ort for	any I	ine, write \$	0 in the	space. In	nclude your non-filin	ıg
	u or your non-filing spouse e space, attach a separate			mbine th	ne information fo	or all e	emplo	yers for th	at persoi	n on the	lines below. If you r	need
								For Debto	or 1		ebtor 2 or ling spouse	
2.	List monthly gross wag deductions). If not paid m					2.	\$		0.00	\$	2,096.34	
3.	Estimate and list month	ly overtime	e pay.			3.	+\$		0.00	+\$	0.00	

0.00

2,096.34

4. Calculate gross Income. Add line 2 + line 3.

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Deb	tor 1	Daniel Lee Mang	-	Case	e number (if known)				
	Сор	y line 4 here	4.	Fo \$	r Debtor 1		Debtor 2 filing sp 2,0		
_	Liet	all payroll deductions:		_					_
5.		• •	E o	\$	0.00	¢	•	C4 00	
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.	- : -	0.00	\$	3	64.00 0.00	_
	5c.	Voluntary contributions for retirement plans	5c.	\$-	0.00	\$		0.00	_
	5d.	Required repayments of retirement fund loans	5d.	- : -	0.00	\$		0.00	_
	5e.	Insurance	5e.	\$_	0.00	\$		0.00	_
	5f.	Domestic support obligations	5f.	\$	0.00	\$		0.00	_
	5g.	Union dues	5g.	\$	0.00	\$		0.00	_
	5h.	Other deductions. Specify:	5h.	+ \$_	0.00	+ \$		0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$	3	64.00	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	1,7	32.34	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$		0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_	0.00	\$		0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$		0.00	_
	8e.	Social Security	8e.	\$_	0.00	\$		0.00	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g.	\$_ \$	0.00	\$		0.00	_
	8h.	Other monthly income. Specify:	8h.	· -	0.00			0.00	_
	011.		_ 011.	·	0.00	`		0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0.00	\$		0.0	0
10	Cald	culate monthly income. Add line 7 + line 9.	10.	;	0.00 + \$	1 73	32.34 =	= \$	1,732.34
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				1,7	72.04	-	1,702.04
11.	Stat Inclu	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your per friends or relatives. In the contribution of the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your per friends or relatives.	deper		. ,	•	chedule . 11.	_	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies					12.	\$	1,732.34
13.	Do	you expect an increase or decrease within the year after you file this form	?					Combii nonthi	ned y income
		No.							
		Voc Explain:							

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Fill	in this information to identify	your case:					
Deb	otor 1 Daniel Lee	Mang			Che	ck if this is:	
	otor 2					An amended filing A supplement show 13 expenses as of	ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for t	ne: NORTH	IERN DISTRICT OF ILLING	OIS		MM / DD / YYYY	
	se number						
1	nown)						
O	fficial Form 106J						
	chedule J: Your						12/15
info	as complete and accurate ormation. If more space is number (if known). Answer ev	needed, atta	ch another sheet to this t	e filing together, b form. On the top of	oth are equ f any additi	ially responsible fo onal pages, write y	r supplying correct our name and case
	t 1: Describe Your Hou	sehold					
1.	Is this a joint case? ■ No. Go to line 2.						
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 liv	e in a separa	ate household?				
	□ No	•					
	☐ Yes. Debtor 2 m	ust file Offici	al Form 106J-2, <i>Expense</i> s	for Separate House	ehold of Deb	otor 2.	
2.	Do you have dependents	? 🗆 No					
	Do not list Debtor 1 and Debtor 2.	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state the						□ No
	dependents names.			Daughter		18 months	■ Yes
							□ No □ Yes
							□ No
							☐ Yes
							□ No
_							☐ Yes
3.	Do your expenses include expenses of people other yourself and your dependent.	than 🗖	No Yes				
Dar	t 2: Estimate Your Ong	oina Monthl	v Evnenses				
Est	imate your expenses as of penses as of a date after the plicable date.	your bankrı	uptcy filing date unless y				
	lude expenses paid for with						
	value of such assistance a ficial Form 106I.)	and have inc	eluded it on Schedule I: Y	our Income		Your expe	enses
4.	The rental or home owne payments and any rent for			nclude first mortgag	e 4. S	.	1,425.00
	If not included in line 4:						
	4a. Real estate taxes				4a. S	\$	0.00
	4b. Property, homeowne				4b. §		0.00
	4c. Home maintenance,				4c. 9	·	0.00
5.	4d. Homeowner's assoc Additional mortgage pay			me equity loans	4d. § 5. §	·	0.00

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ebtor 1	Daniel Lee Mang	Case num	ber (if known)	
. Utili	ties:			
6a.	Electricity, heat, natural gas	6a.	\$	120.00
6b.	Water, sewer, garbage collection	6b.		75.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		120.00
6d.	Other. Specify: Garbage collection	6d.	·	50.00
	d and housekeeping supplies	7.		350.00
	dcare and children's education costs	8.		0.00
	hing, laundry, and dry cleaning	9.	·	25.00
	sonal care products and services	10.	·	40.00
	lical and dental expenses	11.		15.00
	nsportation. Include gas, maintenance, bus or train fare.		Ψ	13.00
	not include car payments.	12.	\$	75.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	ritable contributions and religious donations	14.	\$	0.00
	ırance.			
Do r	not include insurance deducted from your pay or included in lines 4 or 20.			
15a.	Life insurance	15a.	\$	0.00
15b.	Health insurance	15b.	\$	225.00
15c.	Vehicle insurance	15c.	\$	65.00
15d.	Other insurance. Specify:	15d.	\$	0.00
S. Taxe	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Spe		16.	\$	0.00
	allment or lease payments:			
	Car payments for Vehicle 1	17a.	*	845.00
	Car payments for Vehicle 2	17b.	\$	540.00
	Other. Specify:	17c.	·	0.00
	Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report as		c	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	·	
	er payments you make to support others who do not live with you.		\$	0.00
Spe	·	19.		
	er real property expenses not included in lines 4 or 5 of this form or on Sch			0.00
	Mortgages on other property	20a.	· -	0.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	Maintenance, repair, and upkeep expenses	20d.		0.00
	Homeowner's association or condominium dues	20e.	· ·	0.00
. Othe	er: Specify:	21.	+\$	0.00
Calc	culate your monthly expenses			
	Add lines 4 through 21.		\$	3,970.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$ ———	3,310.00
				0.070.00
ZZC.	Add line 22a and 22b. The result is your monthly expenses.		\$	3,970.00
. Calc	culate your monthly net income.		L	
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,732.34
	Copy your monthly expenses from line 22c above.	23b.	· -	3,970.00
	• • •			2,2.2.00
23c.	Subtract your monthly expenses from your monthly income.			0.007.00
	The result is your monthly net income.	23c.	\$	-2,237.66
For e	you expect an increase or decrease in your expenses within the year after you example, do you expect to finish paying for your car loan within the year or do you expect you fication to the terms of your mortgage?			e or decrease because c
ΠY	'es. Explain here:			

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Fill in this infor	mation to identify your	case:			
Debtor 1	Daniel Lee Mang				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Form	m 106Doo				
Official Forr					
Declarat	tion About a	an Individual	Debtor's Sc	hedules	12/15
ii two iiiairieu pi	eopie are ming togethe	r, both are equally respor	isible for supplying con	ect information.	
You must file thi	is form whenever you f	ile bankruptcy schedules	or amended schedules.	Making a false statement	t, concealing property, or
obtaining mone	y or property by fraud i	n connection with a bank	ruptcy case can result in	n fines up to \$250,000, or	imprisonment for up to 20
	8 U.S.C. §§ 152, 1341, 1			• • • •	•
Sig	n Below				
Olg	II Delow				
Did you pa	y or agree to pay some	one who is NOT an attorr	ney to help you fill out b	ankruptcy forms?	
■ No					
☐ Yes. I	Name of person			Attach Bankrupto	y Petition Preparer's Notice,
	·			Declaration, and	Signature (Official Form 119)
Under pena	alty of periury. I declare	that I have read the sumr	nary and schedules filed	d with this declaration and	d
	e true and correct.		····· , ·······························		_
X /s/ Dar	niel Lee Mang		X		
	Lee Mang		Signature of I	Debtor 2	
	re of Debtor 1		J.g	-	
Det	4 . 11 44 . 0047		Dete		
Date _	April 11, 2017		Date		

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Fill in	this information to identify you	r 00001			
Debto					
Debioi	r 1 Daniel Lee Mang First Name	Middle Name	Last Name		
Debtoi (Spouse		Middle Name	Last Name		
` `	I States Bankruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
(if knowr	number n)			_	Check if this is an amended filing
	cial Form 107 ement of Financial	Affairs for Indivic	duals Filing for B	ankruptcy	4/16
inform numbe	complete and accurate as possi ation. If more space is needed, er (if known). Answer every que:	attach a separate sheet to state	this form. On the top of any		
Part 1	hat is your current marital statu		Lived Belore		
	•	· ·			
	Married Not married				
2. Di	uring the last 3 years, have you	lived anywhere other than	where you live now?		
	l No	·	•		
	Yes. List all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>1</i> .	
D	Debtor 1 Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
_	1648 Tall Grass akemoor, IL 60051	From-To: 2014 - 2016	☐ Same as Debtor	l	☐ Same as Debtor 1 From-To:
states a	ithin the last 8 years, did you evand territories include Arizona, Ca No Yes. Make sure you fill out Scl	lifornia, Idaho, Louisiana, Nev	vada, New Mexico, Puerto R		
Part 2	Explain the Sources of You	rincome			
Fil	id you have any income from en Il in the total amount of income yo you are filing a joint case and you	u received from all jobs and a	all businesses, including part	time activities.	ndar years?
	No Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	January 1 of current year until te you filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$2,895.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

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Debtor 1 Daniel Lee Mang

				5 17 4					D.1.		
				Debtor 1					Debtor 2		
				Sources of Check all the		(bef	oss income fore deductions lusions)	s and	Sources of inc		Gross income (before deductions and exclusions)
	r last caler inuary 1 to	ndar year: December 3	31, 2016)	■ Wages, bonuses, ti	commissions,		\$36,09	90.00	☐ Wages, cor bonuses, tips	nmissions,	
				☐ Operatir	ng a business				☐ Operating a	business	
		dar year bef December 3		■ Wages, bonuses, ti	commissions,		\$36,10	00.00	☐ Wages, cor bonuses, tips	nmissions,	
				☐ Operatir	ng a business				☐ Operating a	business	
	winnings. List each	İf you are fili	ng a joint cas	e and you ha	ntal income; inter ave income that y h source separat	ou rec	eived together	, list it or	nly once under D	ebtor 1.	d gambling and lottery
			iano.	Debtor 1					Debtor 2		
				Sources of Describe be		eac (bef	ess income from th source fore deductions lusions)		Sources of inc		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	yments You	Made Befor	e You Filed for I	Bankrı	uptcy				
6.	Are eithe ☐ No.	Neither De individual puring the No.	btor 1 nor D rimarily for a 90 days befor Go to line 7. List below e paid that cre not include p	ebtor 2 has personal, far re you filed for ach creditor editor. Do no payments to	mily, or househol or bankruptcy, di to whom you pai	imer d d purp d you p d a tota its for c nis ban	lebts. Consum ose." pay any credito al of \$6,425* o domestic supprikruptcy case.	or a total r more in ort obliga	of \$6,425* or mo one or more pa tions, such as c	ore? yments and the	1(8) as "incurred by an ne total amount you nd alimony. Also, do
	■ Yes.				primarily consu or bankruptcy, di			or a total	of \$600 or more	?	
		■ No. □ Yes		ach creditor ments for do							creditor. Do not nclude payments to ar
	Creditor	's Name and	Address		Dates of payme	nt	Total amo	ount oaid	Amount you still owe	Was this p	payment for

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Deb	otor 1	Daniel Lee Mang	Document I	Page 43 of 58	3 se number (<i>if known</i>)		
DOL	7.01	Daniel Lee Maily			oc namber (" known)		
7.	Inside of whi	in 1 year before you filed for bankruptcers include your relatives; any general particle you are an officer, director, person in the iness you operate as a sole proprietor. 11 ny.	tners; relatives of any gen control, or owner of 20% o	neral partners; partn or more of their votin	erships of which you	u are a gener ny managing a	al partner; corporations agent, including one for
	□ `	No Yes. List all payments to an insider. der's Name and Address	Dates of payment	Total amount	Amount you	Posson for	this payment
	IIISIC	del 5 Name and Address	Dates of payment	paid	Amount you still owe	Reason Ioi	tilis payment
8.	inside	in 1 year before you filed for bankruptc er? de payments on debts guaranteed or cosi		ments or transfer	any property on a	ccount of a d	lebt that benefited an
	_	No Yes. List all payments to an insider					
	Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe		this payment ditor's name
Par	t 4:	Identify Legal Actions, Repossession	s, and Foreclosures				
9.	List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No						
	_	Yes. Fill in the details. e title	Nature of the case	Court or agency	,	Status of the	ne case
	Case	e number		-			
10.		n 1 year before you filed for bankrupto k all that apply and fill in the details below		erty repossessed,	foreclosed, garnis	shed, attache	d, seized, or levied?
	_	No. Go to line 11. Yes. Fill in the information below.					
	Cred	ditor Name and Address	Describe the Property		Date		Value of the
			Explain what happened	d			property
11.	accoi	in 90 days before you filed for bankrup unts or refuse to make a payment beca No Yes. Fill in the details.		luding a bank or fi	nancial institution	, set off any	amounts from your
		litor Name and Address	Describe the action the	e creditor took	Date taker	action was	Amount
12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors court-appointed receiver, a custodian, or another official?				efit of creditors, a			
		No Yes					
Par	t 5:	List Certain Gifts and Contributions					
-		n 2 years before you filed for bankrupt	cv. did you give any gift	s with a total value	of more than \$60	0 per person	?
	_	No	er, and you give any gind	a total value	. S. mere man you	- por poraon	•
		Yes. Fill in the details for each gift.					

per person

Address:

Describe the gifts

Value

Gifts with a total value of more than \$600

Person to Whom You Gave the Gift and

Dates you gave the gifts

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Dei	Didit Daniei Lee Mang		Cas	se number (#	known)	
14.	Within 2 years before you filed for bankr	ruptcy, (did you give any gifts or contributions v	with a total	value of more than	\$600 to any charity
	No					
	Yes. Fill in the details for each gift or o	contribut	ion.			
	Gifts or contributions to charities that a more than \$600 Charity's Name	total	Describe what you contributed		Dates you contributed	Value
	Address (Number, Street, City, State and ZIP Code	le)				
Par	tt 6: List Certain Losses					
15.	Within 1 year before you filed for bankru or gambling?	ıptcy or	since you filed for bankruptcy, did you	ı lose anyth	ing because of the	ft, fire, other disaste
	No					
	☐ Yes. Fill in the details.					
	Describe the property you lost and	Descri	be any insurance coverage for the loss	5	Date of your	Value of property
	how the loss occurred	Include insurar	e the amount that insurance has paid. List nce claims on line 33 of <i>Schedule A/B: Pro</i>	pending operty.	loss	los
Par	rt 7: List Certain Payments or Transfers	s				
16.	Within 1 year before you filed for bankru	intev di	id you or anyone else acting on your be	shalf nav or	transfer any prope	arty to anyone you
10.	consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition p	prepari	ng a bankruptcy petition?			nty to unyone you
	□ No					
	Yes. Fill in the details.					
	Person Who Was Paid		Description and value of any propert	v	Date payment	Amount o
	Address		transferred	,	or transfer was	paymen
	Email or website address Person Who Made the Payment, if Not \	You			made	
	Michael T. Barrett, Sr.		Attorney Fees: \$949.00		March 21,	\$1,317.00
	530 Rockland Road		Court filing fees: \$335.00		2017	. ,
	Crystal Lake, IL 60014		Credit Report: \$33.00			
	CC Advising		Pre-bankruptcy credit counseling	g	March 15,	\$9.96
			course		2017	
17.	promised to help you deal with your cree Do not include any payment or transfer that No	ditors o	r to make payments to your creditors?		transfer any prope	erty to anyone who
	Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any propert transferred	ty	Date payment or transfer was made	Amount o paymen
18.	Within 2 years before you filed for bankr	ruptcv.	did vou sell, trade, or otherwise transfe	er any prope	erty to anyone. othe	er than property
	transferred in the ordinary course of you	ur busir	ess or financial affairs?			
	Include both outright transfers and transfers include gifts and transfers that you have alr			urity interest	or mortgage on you	r property). Do not
	No	. Judy 113	S. T. T. O. C. C. T. C. T. C.			
	Yes. Fill in the details.					
	Person Who Received Transfer		Description and value of	Describe a	ny property or	Date transfer was

Address

property transferred

Person's relationship to you

made

payments received or debts

paid in exchange

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Debtor 1 **Daniel Lee Mang**

19.	within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prot		ny property to a	self-settle	ed trust or similar device	of which you are	e a
	Yes. Fill in the details.						
	Name of trust	Description and	value of the pro	perty trans	sferred	Date Transfer made	was
Pai	t 8: List of Certain Financial Accounts, Inst	truments, Safe Deposi	t Boxes, and St	orage Uni	ts		
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or	other financial accou	nts; certificates	of deposi		•	
	houses, pension funds, cooperatives, associ No Yes. Fill in the details.	lations, and other fina	nciai institution	is.			
		Last 4 digits of account number	Type of acco instrument	unt or	Date account was closed, sold, moved, or transferred	Last bala before closir trar	
21.	Do you now have, or did you have within 1 yo cash, or other valuables?	ear before you filed fo	r bankruptcy, a	ny safe de	posit box or other depos	itory for securiti	ies,
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?	
22.	Have you stored property in a storage unit or	r place other than you	r home within 1	year befo	re you filed for bankrupto	;y?	
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?	
Pai	t 9: Identify Property You Hold or Control f	or Someone Else					
23.	Do you hold or control any property that som for someone.	neone else owns? Incl	ude any proper	ty you bor	rowed from, are storing f	or, or hold in tru	ust
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property	V	/alue
Pai	t 10: Give Details About Environmental Info	rmation					
For	the purpose of Part 10, the following definitio	ns apply:					
	Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these	e air, land, soil, surfac	e water, ground				is or
	Site means any location, facility, or property to own, operate, or utilize it, including dispos		environmental	law, wheth	ner you now own, operate	e, or utilize it or u	used
	Hazardous material means anything an envir hazardous material, pollutant, contaminant, of		as a hazardous	waste, ha	zardous substance, toxid	c substance,	

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 **Daniel Lee Mang**

24.	. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
	No							
	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any	release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or adminis	strative proceeding under any envir	onmental law? Include settlements a	and orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	11: Give Details About Your Business or Con	nections to Any Business						
27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have any	y of the following connections to any	/ business?				
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation							
	■ No. None of the above applies. Go to Part	12.						
	Yes. Check all that apply above and fill in the	he details below for each business						
	Business Name De Address	scribe the nature of the business	Employer Identification number Do not include Social Security					
	(Number, Street, City, State and ZIP Code)	me of accountant or bookkeeper	Dates business existed					
28.	Within 2 years before you filed for bankruptcy, of institutions, creditors, or other parties.	did you give a financial statement to	o anyone about your business? Inclu	ude all financial				
	■ No □ Yes. Fill in the details below.							
	Name Address (Number, Street, City, State and ZIP Code)	te Issued						

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Debtor 1 Daniel Lee Mang Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Daniel Lee Mang Signature of Debtor 2 **Daniel Lee Mang** Signature of Debtor 1 Date April 11, 2017 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

■ No

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-11429 Doc 1 Filed 04/11/17 Entered 04/11/17 13:50:15 Desc Main Document Page 52 of 58

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Daniel Lee Mang		Case No.			
	-	Debtor(s)	Chapter	7		
	DISCLOSURE OF COMPE	NSATION OF ATTOR	NEY FOR DE	BTOR(S)		
c	compensation paid to me within one year before the filing	6(b), I certify that I am the attorney for the above named debtor(s) and that ng of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to of or in connection with the bankruptcy case is as follows:				
	For legal services, I have agreed to accept		\$	949.00		
	Prior to the filing of this statement I have received		\$	949.00		
	Balance Due		\$	0.00		
2. T	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3. Т	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4. I	■ I have not agreed to share the above-disclosed comp	pensation with any other person t	ınless they are memb	pers and associates of 1	ny law firm.	
[☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na				w firm. A	
5. I	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspects	of the bankruptcy ca	ase, including:		
b c	a. Analysis of the debtor's financial situation, and rendo. Preparation and filing of any petition, schedules, state. Representation of the debtor at the meeting of credit d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on home	tement of affairs and plan which ors and confirmation hearing, and reduce to market value; exec ons as needed; preparation	may be required; d any adjourned hear mption planning;	ings thereof;	ing of	
6. E	By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.					
		CERTIFICATION				
	certify that the foregoing is a complete statement of an ankruptcy proceeding.	ny agreement or arrangement for j	payment to me for re	presentation of the de	btor(s) in	
A	pril 11, 2017	/s/ Michael T. Barr	ett, Sr.			
Date		Michael T. Barrett Signature of Attorney				
		James D. Huls & A	Associates			
		530 Rockland Roa Crystal Lake, IL 60				
		815-455-4755 Fax	c: 815-455-5718			
		michael@jdhuls.c Name of law firm	om		<u></u>	
		rame oj iaw jirm				

United States Bankruptcy Court Northern District of Illinois

In re	Daniel Lee Mang		Case No.	
		Debtor(s)	Chapter 7	
	VER	RIFICATION OF CREDITOR MA	ATRIX	
		Number of Creditors: 45		
	The above-named Debtor(s) h (our) knowledge.	hereby verifies that the list of credito	ors is true and correct to t	he best of my
Date:	April 11, 2017	/s/ Daniel Lee Mang Daniel Lee Mang Signature of Debtor		

Advocate Health & Hospital Corp 2025 Windsor Drive Oak Brook, IL 60523

Avant Credit, Inc C/O CACH LLC P.O. Box 5980 Denver, CO 80217-5980

Bank Of America Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410

BMO Harris Bank P.O. Box 6290 Carol Stream, IL 60197-6290

Cap1/Best Buy P.O. Box 49352 San Jose, CA 95161

Capital One Attn: General Correspondence/Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Centegra Health System P.O. Box 6204 Carol Stream, IL 60197

Centegra Health System P.O. Box 6204 Carol Stream, IL 60197-6204

Centegra Health System P.O. Box 6204 Carol Stream, IL 60197-6204

Citi Diamond Preferred Card P.O. Box 6500 Sioux Falls, SD 57117

Comenity Bank/Harlem Furniture Po Box 182125 Columbus, OH 43218

Diversified Consultant Dci Po Box 551268 Jacksonville, FL 32255

Dr. Asya Ali 1775 Dempster St. Park Ridge, IL 60068

Dr. Brian Jokhy 2400 N. Rockton Rockford, IL 61103

Dr. David Ondrula 650 Dakota Street Crystal Lake, IL 60012

Dr. Gia Compagnoni 802 Fox Glen Ct. Barrington, IL 60010

Dr. James Feldman 450 W. Highway 22 Barrington, IL 60010

Dr. Michael Lesser 1095 Pingree Road Suite 108 Crystal Lake, IL 60014

Dr. Oliver Kim 1775 Dempster Park Ridge, IL 60068

Dr. Paras Patel 2400 N. Rockton Rockford, IL 61103

Dr. Rebeca Andersen 4201 W. Medical Center McHenry, IL 60050 Dr. Thomas Peeters 5 Wood Creek Road Barrington, IL 60010

Dr. Wendy Ward 4201 W. Medical Drive McHenry, IL 60050

Forest Recovery Servic Po Box 83 Barrington, IL 60011

H & R Accounts, Inc Po Box 672 Moline, IL 61265

H & R Accounts, Inc Po Box 672 Moline, IL 61265

H & R Accounts, Inc Po Box 672 Moline, IL 61265

Iowa Student Loan
6775 Vista Dr
West Des Moines, IA 50266

Isl/pnc Bank
6805 Vista Dr # I
West Des Moines, IA 50266

McHenry Orthoapedics 420 N. IL Rt. 31 Crystal Lake, IL 60014

Med Business Bureau 1460 Renaissance Dr #400 Park Ridge, IL 60068

Mnet Fin Inc 95 Argonaut Aliso Viejo, CA 92656 Nissan Motor Acceptance NMAC/BANKRUPTCY P.O. Box 660360 Dallas, TX 75266

Nissan Motor Acceptance NMAC/Bankruptcy P.O. Box 660360 Dallas, TX 75266

Nissan Motor Acceptance Corp/Infinity Lt Nmac/Attn: Bankruptcy Po Box 660360 Dallas, TX 75266

Nissan Motor Acceptance Corp/Infinity Lt Nmac/Attn: Bankruptcy Po Box 660360 Dallas, TX 75266

Nordstrom Fsb Correspondence Po Box 6555 Englewood, CO 80155

Northern Illinois Medical Center P.O. Box 6203 Carol Stream, IL 60197-6203

Personal Finance/p312 1350 East Chicago St. Suite 28 Elgin, IL 60123

Rose Iverson FNP 1095 Pingree Road Suite 108 Crystal Lake, IL 60014

Syncb/hh Gregg C/o Po Box 965036 Orlando, FL 32896

Synchrony Bank/Walmart Attn: Bankruptcy Po Box 956060 Orlando, FL 32896

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Target C/O Financial & Retail Srvs Mailstopn BT POB 9475 Minneapolis, MN 55440

Tri State Adjustment F 440 Challenge Street Freeport, IL 61032

Truemper, Titiner & Brouch, Ltd. 1700 N. Farnsworth Ave Aurora, IL 60505